

## ISSUE SLIP STAPLE AREA (for additional cross references)

TC 3287C

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		321	2/9
FORMALITY REVIEW	AM	516	
RESPONSE FORMALITY REVIEW			32/23/61

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 - ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	1/4/61
2	✓
3	✓
4	—
5	—
6	✓
7	○
8	○
9	✓
10	—
11	—
12	—
13	✓
14	○
15	✓
16	—
17	—
18	—
19	○
20	✓
21	—
22	—
23	—
24	✓
25	○
26	○
27	✓
28	—
29	—
30	—
31	✓
32	○
33	✓
34	✓
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Claim	Date
Final	
Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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